

*Inyo County*

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

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**STATEMENT OF ECONOMIC INTERESTS**

**COVER PAGE**

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Date Received  
Official Use Only  
FEB 25 2010

Please type or print in ink.

NAME (LAST)	(FIRST)	(MIDDLE)	DAYTIME TELEPHONE NUMBER	
CERVANTES	RICHARD	E		
MAILING ADDRESS STREET (Business Address Acceptable)		CITY	STATE	ZIP CODE
			CA	
OPTIONAL: E-MAIL ADDRESS				

**1. Office, Agency, or Court**

Name of Office, Agency, or Court:

*COUNTY OF INYO*

Division, Board, District, if applicable:

*5TH DIST 5TH*

Your Position:

*SUPERVISOR*

▶ If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.)

Agency: *GBAPCD*

Position: *BOARD*

**2. Jurisdiction of Office (Check at least one box)**

☐ State

☐ County of *INYO*

☐ City of

☐ Multi-County

☐ Other

**3. Type of Statement (Check at least one box)**

☐ Assuming Office/Initial

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

☒ Annual: The period covered is January 1, 2009, through December 31, 2009.

-or-

☐ The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2009.

☐ Leaving Office Date Left: \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Check one)

☐ The period covered is January 1, 2009, through the date of leaving office.

-or-

☐ The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.

☐ Candidate Election Year: \_\_\_\_

**4. Schedule Summary**

▶ Total number of pages including this cover page: 1

▶ Check applicable schedules or "No reportable interests."

I have disclosed interests on one or more of the attached schedules:

Schedule A-1 ☐ Yes - schedule attached  
*Investments (Less than 10% Ownership)*

Schedule A-2 ☐ Yes - schedule attached  
*Investments (10% or Greater Ownership)*

Schedule B ☐ Yes - schedule attached  
*Real Property*

Schedule C ☐ Yes - schedule attached  
*Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)*

Schedule D ☐ Yes - schedule attached  
*Income - Gifts*

Schedule E ☐ Yes - schedule attached  
*Income - Gifts - Travel Payments*

-or-

☒ No reportable interests on any schedule

**5. Verification**

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 02/25/10  
(month, day, year)

Signature \_\_\_\_\_  
(File the originally signed statement with your filing official)